Form 78 10/01/2004

ORIGINAL: CENTRAL OFFICE-FISCAL

VIRGINIA DEPARTMENT OF FORESTRY PINE BARK BEETLE PREVENTION COST-SHARE PROGRAM APPLICATION

PBBP NUMBER

04BB

TRACT NUMBER:	PARCEL:	LANDOWNER'S NAME:	
APPLICANT'S REQUEST			
l,		(NAME), request funding under the Bark Beetle Preven	tion Program for the
pre-commercial pine thinning at			
		(<i>F</i>	DDRESS OR LOCATION).
I understand the payment to me shall be 50% of direct project cost, not to exceed a total of \$10,000; and I agree:			
or if the residual trees are intentionally	removed or dest	nalty fee, if for any reason the approved project is not co troyed (by current or subsequent landowners) within a p nercial thinning or final harvest approved by the Departm	period of ten (10) years
		of the parcel where the project is to be performed, and e purpose of inspecting the progress and maintenance o	
3. To provide receipts to the Department	of Forestry.		
OWNER/AGENT SIGNATURE		DATE	
DEPARTMENT OF FORESTRY RECOM	MENDATION:	S AND APPROVAL	
RECOMMENDATIONS:			
I certify that the above project is needed and, if properly carried out according to the above recommendations, will qualify for incentive payment under the Pine Bark Beetle Prevention Cost-Share Program.			
VDOF FORESTER NAME (PRINT)		VDOF FORESTER SIGNATURE	DATE
` '			
RESOURCE INFORMATION BUDGET MANAGER OR	DESIGNEE	DATE	
I certify that the above project was completed according to the above recommendations.			
ACRES COMPLETED			
FINAL PROJECT COST			
FINAL COST SHARE AMOUNT		VDOT FORFATFO FILLY ADDROVAL	DATE
(50% of Project Co	ost)	VDOF FORESTER FINAL APPROVAL	DATE
AMENDMENT OR CANCELLATION OF PROJECT			
☐ I have cancelled my project and hereby request to cancel my application for Pine Bark Beetle Prevention Cost-Share Program funds.			
☐ My project requires amendment as described		J	
OWNER / AGENT SIGNATURE	DATE	VDOF FORESTER SIGNATURE	DATE